2834 Fled



Serial No.: 10/042,068

I hereby certify that this correspondence is being deposited with the United States Postal Service, with sufficient postage, as first class mail in an envelope addressed to: MS/Amendment Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

on August 10, 2004

Date of Deposit

Anthony P. Curtis, Ph.D., Reg. No.:46,193

Name of applicant, assignee or Registered Representative

Signature

Date of Signature

Our Case No. 9281-4240

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

in re Application of:	
Tomokuni WAUKE) }
Serial No.: 10/042,068) Examiner: Le, Dang D)
Filing Date: 01/08/2002) Group Art Unit 2834
For: THIN INNER ROTOR MOTOR FOR ROTATABLY DRIVING MEDIUM, AND DISK APPARATUS USING THE SAME)))

AMENDMENT AND RESPONSE

MS/Amendment Commissioner for Patents Alexandria, VA 22313-1450

Dear Sir:

This paper is submitted in response to the Office Action of June 7, 2004. The Claims begin on page 2 and the Remarks begin on page 13.

08/30/2004 PWALKER 00000001 231925 10042068

01 FC:1202

72.00 DA

02 FC:1201

86.00 DA

1

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number				
		CLAIMS AS	FILED -	- PART I	SMALL E	ENTITY	OR	OTHER THAN SMALL ENTITY				
FOR NUMBER FILED NUMBER EXTR					R EXTRA	RATE	FEE		RATE	FEE		
BASIC FEE							s	OR		s		
(37 CFR 1.16(a)) TOTAL CLAIMS						x s =		1	x s =			
(37 CFR 1.16(c)) minus 20 = * INDEPENDENT CLAIMS					X \$=		OR	X \$=				
(37 CFR 1.16(b)) minus 3 = *					x \$=		OR	× \$=				
MUL	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+ \$=		OR	+ \$=			
• If t	* If the difference in column 1 is less than zero, enter "0" in column 2.							OR	TOTAL			
	CLAIMS AS AMENDED – PART II											
1								OR		R THAN		
		(Column 1)	1 1	(Column 2) HIGHEST	(Column 3)	SMALL I	ENTITY	1	SMALL	ENTITY		
AMENDMENT >		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
ME	Total (37 CFR 1.16(c))	. 71)	Minus	"/6/0	= 4	x s 9 =		OR	x s /8 =	\$72		
	Independent (37 CFR 1.16(b))	. 7	Minus	··· 27	= 1	x \$ 43 =		OR	x s X6 =	886		
₽M	-	TATION OF MILITIPI	E DEPENDS	ENT CLAIM (37 CE	R 1 16(d))	+5/45=		OR OR	29	7 U V		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					TOTAL			TOTAL	O.A			
						ADD'L FEE		OR	ADD'L FEE	W 4'		
(Column 1) (Column 2) (Column 3)							1		1			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
)ME	Total (37 CFR 1.16(c))	•	Minus	••	=	x s=		OR	x \$=			
EN	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$ =		OR	x \$ =			
AM	FIRST PRESEN	TATION OF MULTIPL	E DEPENDE	ENT CLAIM (37 CF	R 1.16(d))	+\$ =		OR	+s =			
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
		(Column 1)		(Column 2)	(Column 3)			•				
J		CLAIMS		HIGHEST	PRESENT	DATE	ADDI	l	DATE	ADDI		
l <u>⊢</u> l		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
)ME	Total (37 CFR 1.16(c))	•	Minus	••	=	x \$=		OR	x \$=			
AMENDMEN	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$=		OR	x \$=			
AM	FIRST PRESENT	TATION OF MULTIPL	E DEPENDI	ENT CLAIM (37 CF	R 1.16(d))	+s =		OR	+ \$ =			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							1	TOTAL			
	If the entry in o	column 1 is less tha	an the entn	y in column 2, writ	ADD'L FEE 3.		OR	ADD'L FEE				
•	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".											

"If the "Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentialty is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 Application or Docket Number										ber		
CLAIMS AS FILED - PART I (Column 1) (Column					mn 2)	SMAL TYPE	SMALL ENTITY OTHER					
TC	TAL CLAIMS		66				RA	rE	FEE		RATE	FEE
FO	R		NUMBER F	ILED	NUMBI	NUMBER EXTRA			370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS (L mini					us 20= * 46			9=		OR	X\$18=	828
INDEPENDENT CLAIMS					* 1		X4:	2=		OR	X84=	84
MULTIPLE DEPENDENT CLAIM PRESENT							+14	0=		OR	+280=	
* If the difference in column 1 is less than zero, enter *0" in column 2							TOT	AL		OR	TOTAL	1652
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMA	OTHER I				
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	· 67	Minus	 4	6	= /	×\$	9=		OR	X\$18=	4/8
AME	Independent	• 4	Minus	***	<u> </u>	=/	X4:	2=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+14	0=.		OR	+280=	
							ADDIT.	SEE.		OR	TOTAL ADDIT. FEE	
		(Column 1)	-		mn 2)	(Column 3)						
IDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	•	Minus	##		=	X\$	9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X4	2=		OR	X84=	
E	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	TCLAIM			Λ_			+280=	
							+14	OTAL	<u> </u>	OR	TOTAL	
ADDIT. FEE										OR	ADDIT. FEE	
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)			ADDI	1	<u> </u>	ADDI-
DMENT C		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	TIONAL FEE
S O	Total	*	Minus	***		=	X\$	9=		OB	X\$18=	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Minus

X42=

+140=

Independent

OR

OR

X84=

+280=

TOTAL ADDIT. FEE